## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10766398

| CLAIMS AS FILED - PART I         |   |   |                                 |                                      |              |                    |        | SMALL E        | NTITY                  |         | OTHER               | THAN                   |
|----------------------------------|---|---|---------------------------------|--------------------------------------|--------------|--------------------|--------|----------------|------------------------|---------|---------------------|------------------------|
| _                                |   |   | (Column 1)                      |                                      | (Column 2)   |                    | 1      | TYPE           |                        | OR      |                     |                        |
| TOTAL CLAIMS                     |   |   | 19                              |                                      |              |                    |        | RATE           | FEE                    | 7       | RATE                | FEE                    |
| FOR                              |   |   | NUMBER FILED                    |                                      | NUMBER EXTRA |                    |        | BASIC FEI      | 385.00                 | OR      | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS          |   |   | (i) minus 20= *                 |                                      | * Ø          |                    |        | X\$ 9=         |                        | OR      | X\$18=              |                        |
| INDEPENDENT CLAIMS               |   |   | 3 minus 3 = *                   |                                      | · 🔑          |                    |        | X43=           |                        | OR      | X86=                |                        |
| MU                               | JLTIPLE DEPEI   | NDENT CLAIM P                             | RESENT                          | ESENT                                |              |                    |        | +145=          |                        | OR      | +290=               |                        |
| * If                             | the difference  | e in column 1 is                          | less than zero, enter "0" in co |                                      |              | column 2           | Į      | TOTAL          | <b>†</b>               | OR      | TOTAL               | 770                    |
| CLAIMS AS AMENDED - PART II      |   |   |                                 |                                      |              |                    |        |                | -                      |         | OTHER               | THAN                   |
|                                  |   | (Column 1)                                | (Column 2)                      |                                      |              | (Column 3)         |        | SMALL          | ENTITY                 | OR      | SMALL               | ENTITY                 |
| AMENDMENT A                      |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                 | HIGHE<br>NUMB<br>PREVIO<br>PAID F    | ER<br>USLY   | PRESENT<br>EXTRA   |        | RATE           | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|                                  | Total   | *   | Minus                           | **                                   |              | =                  |        | X\$ 9=         |                        | OR      | X\$18=              |                        |
|                                  | Independent   | *   | Minus                           |                                      |              | -                  |        | X43=           |                        | OR      | X86=                |                        |
| <u> </u>                         | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                 |                                      |              |                    |        |                |                        | OR      | +290=               |                        |
|                                  |   |   |                                 |                                      |              |                    |        | TOTAL          |                        | OR      | TOTAL               |                        |
|                                  |   | A   | DDIT. FEE                       |                                      |              | addit. Fee         |        |                |                        |         |                     |                        |
|                                  |   | (Column 1) CLAIMS                         | •                               | (Colum                               | ST           | (Column 3)         | 1 г    |                | ADDI-                  | 1       |                     | ADDI-                  |
| AMENDMENT B                      |   | REMAINING<br>AFTER<br>AMENDMENT           |                                 | NUMB<br>PREVIOU<br>PAID F            | JSLY         | PRESENT<br>EXTRA   |        | RATE           | TIONAL<br>FEE          |         | RATE                | TIONAL<br>FEE          |
|                                  | Total   | *   | Minus                           | **                                   |              | =                  |        | X\$ 9=         |                        | OR      | X\$18=              | -                      |
|                                  | Independent   | *   | Minus                           | ***                                  |              | =                  | ] [    | X43=           |                        | OR      | X86=                |                        |
|                                  | FIRST PRESE   | ENDENT (                                  | CLAIM                           |                                      | <b>!</b>  -  |                    |        | On.            |                        |         |                     |                        |
|                                  |   |   |                                 |                                      |              |                    |        | +145=<br>TOTAL |                        | OR      | +290=               | •                      |
|                                  |   |   |                                 |                                      |              |                    |        |                |                        | OR ,    | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3) |   |   |                                 |                                      |              |                    |        |                |                        |         |                     |                        |
| AMENDMENT C                      | `   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·                               | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FO | ER<br>JSLY   | PRESENT<br>EXTRA   |        | RATE           | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|                                  | Total   | *   | Minus                           | **                                   |              | =                  |        | X\$ 9=         |                        | OR      | X\$18=              |                        |
|                                  | Independent   | *   | Minus                           | ***                                  |              | =                  | ▎┢     | X43=           |                        |         | X86=                |                        |
| <u> </u>                         | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                 |                                      |              |                    | -      | 740-           |                        | OR      | 7,00-               |                        |
| * (1                             | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                 |                                      |              |                    |        |                | · _                    | OR      | +290=               | -                      |
| **                               | f the "Highest Nur  | A[  | TOTAL<br>DDIT. FEE              |                                      | OR ,         | TOTAL<br>ODIT. FEE |        |                |                        |         |                     |                        |
| 1                                | The "Highest Num  | mber Previously Pa<br>ber Previously Paid | For" (Total or                  | Independen                           | t) is the    | highest number     | r foun | d in the app   | ropriate box           | in coli | ımn 1.              |                        |